Amendments to the Specification:

Please amend paragraph 0011 as follows:

[0011] To achieve the above object, the present invention as set forth in claim 1 provides an intraductal foreign body removal instrument which removes fibrous foreign bodies out of present in a duct having a liquid filled therein, characterized by comprising: a flexible insertion tube inserted in the duct; a wire made of flexible wire material and inserted in the insertion tube so as not to project from the end thereof; and a rotating device which rotates the wire in and thereby vibrates the tip of the insertion tube.

Please amend paragraph 0012 as follows:

[0012] The invention set forth in claim 1 allows the insertion tube and the wire in the insertion tube to be reduced in diameter, making it possible to insert them easily in a duct. Besides, that side (hereinafter referred to as a free end side) of the intraductal foreign body removal instrument which is inserted in a duct is not equipped with any special mechanism (such as the gripping mechanism of the conventional example). That is, when removing fibrous foreign bodies out of a duct using the intraductal foreign body removal instrument, the free end side is fed into the duct, but it does not encounter much resistance because it is only the insertion tube (and the wire in the insertion tube). Consequently, even elbows and similar bends, for example, do not offer high resistance. Thus, the instrument can be used even in small-diameter ducts. Also, feed limits of the intraductal foreign body removal instrument can be increased.

Please amend paragraph 0017 as follows:

[0017] Claim 2 of the The present invention also sets forth the intraductal foreign body removal instrument according to claim 1, characterized in that the intraductal foreign body removal instrument is a catheter inserted into an intravital duct wire has a curved portion on the free end side thereof.

Please add NEW paragraph 0017.1 as follows:

[0017.1] According to the invention, a curved portion is provided on the free end side of the wire, which is suitable for effectively producing a convection of a fluid.

Please add NEW paragraph 0017.2 as follows:

[0017.2] The present invention also sets forth the intraductal foreign body removal instrument, characterized in that the intraductal foreign body removal instrument is a catheter inserted into an intravital duct.

Please amend paragraph 0018 as follows:

[0018] The invention set forth in claim 2 further allows a small-diameter catheter with a simple mechanism to be constructed, making it possible to remove fibrous foreign bodies out of intravital ducts without damaging inner walls of the ducts. Thus, the intraductal foreign body removal instrument is less invasive to the patients.

Please amend paragraph 0019 as follows:

[0019] Claim 3 of the The present invention also sets forth the intraductal foreign body removal instrument according to claim 1 or 2, characterized by further comprising a flexible guide tube which is inserted in the duct and into which the insertion tube is inserted loosely.

Please amend paragraph 0020 as follows:

[0020] The invention set-forth in elaim 3, according to which the insertion tube is loosely inserted into the guide tube, allows the guide tube and insertion tube to move relative to each other in the longitudinal direction. If the clearance between the guide tube and insertion tube is designed to accommodate fibrous foreign bodies tangled around the free end side of the insertion tube, when withdrawing the intraductal foreign body removal instrument from the duct through insertion position, the wire inside insertion tube and insertion tube can be retrieved together with the fibrous foreign bodies after being stored in the guide tube. This suitably prevents the fibrous foreign bodies from falling off the free end side of the insertion tube as well as prevents them from damaging inner walls of the duct during retrieval. Also, where the insertion tube is covered by the guide tube, the vibration of the insertion tube can be reduced by the guide tube.

Please amend paragraph 0059 as follows:

[0059] Furthermore, the insertion tube 20 is loosely inserted into the guide tube 25. That is, the guide tube 25 and insertion tube 20 can move relative to each other in the longitudinal direction. Also, the insertion tube 20 is inserted into the guide tube 25 with a predetermined clearance which can accommodate fibrous foreign bodies 80 tangled around the free end side

10a. Consequently, the insertion tube 20 and the wire 30 in the insertion tube can be stored once in the guide tube 25 together with the foreign bodies 80 so that the free end side 10a is retrieved and foreign bodies are removed from the duct 90 through the insertion position. This suitably prevents the fibrous foreign bodies 80 from falling off the free end side 10a as well as prevents them from damaging inner walls of the duct 90 during retrieval. Also, where the insertion tube 20 is covered by the guide tube 25, the vibration of the insertion tube 20 can be reduced by the guide tube 25.

Please amend paragraph 0063 as follows:

[0063] Also, although in the above embodiment, the insertion tube 20 with the wire 30 in it is inserted into the guide tube 25, this is not restrictive and it is not strictly necessary to use the guide tube 25. However, preferably the intraductal foreign body removal instrument is equipped with a guide tube to reduce vibration by means of the guide tube 25 in locations other than near the free end side 10a where convection caused by vibration is required, prevent the fibrous foreign bodies to be removed from falling off the free end side 10a, and prevent the fibrous foreign bodies from damaging inner walls of the duct when they are retrieved.

Before paragraph [0075] please delete subheader: (Example).